Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Senate Majority PAC	
	C C00484642
Check if X 24-hour report 48-hour report New report Amends report filed	on Mam / Dab / Yayayay
Full Name of Payee Ambrosino Muir Hansen Crounse	Date of Public Distribution/Dissemination
	11 02 2016
Mailing Address 500 Sansome St	Amount
Ste 201  City State Zip Code	35990.00
San Francisco CA 94111-3215	Transaction ID : VN7GBA76JC6 Date of Disbursement or Obligation
Purpose of Expenditure Direct Mail - Estimate  Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate Support Office	e Sought: House District:
Bayh, Evan, , , Oppose	President Senate State: IN
Calendar Year-To-Date Per Election for Office Sought  Disbut 2016	orsement For: Primary   ✓ General  Other (specify)   ✓
Full Name of Payee Blueprint Interactive	Date of Public Distribution/Dissemination  11 02 2016
Mailing Address 1155 Connecticut Ave NW	11 02 2010
Ste 601	Amount
City State Zip Code	126258.15
Washington DC 20036-4306	Transaction ID: VN7GBA76N24 Date of Disbursement or Obligation
Purpose of Expenditure Online Advertising - Estimate  Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate Support Offic	e Sought: House District:
Ayotte, Kelly, , ,	President Senate State: NH
Calendar Year-To-Date Per Election for Office Sought  Disb 2016	ursement For: Primary   General  Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	162248.15
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not me with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
Lambe, Rebecca, , ,   [Electronically Filed] Date  Signature	03 2016
orginature	

#### 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	EITH EXI EITH			PAGE 2 OF 8 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Senate Majority PAC				C C00484642
				C 000404042
Check if 24-hour report 48-hour report	X New rep	port Amends repo		M / D D / Y H Y H Y
Full Name of Payee			Date o	of Public Distribution/Dissemination
Blueprint Interactive				11 02 2016
Mailing Address 1155 Connecticut Ave NW			Amour	nt
Ste 601				10000.05
City	State DC	Zip Code 20036-4306	Trans	42086.05 action ID : VN7GBA76N31
Washington		20030-4300		of Disbursement or Obligation
Purpose of Expenditure Online Advertising - Estimate		Category/ Type	M	M / D D / Y Y Y Y Y
Name of Federal Candidate		Support	Office Sought	t: House District:
Trump, Donald, J., ,		<b>X</b> Oppose	<b>x</b> Preside	
Calendar Year-To-Date			Disbursement	For: Primary Seneral
Per Election for Office Sought		1948052.80	2016 Ot	ther (specify)
Full Name of Payee			Date o	of Public Distribution/Dissemination
Blueprint Interactive				11 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1155 Connecticut Ave NW				
Ste 601			Amour	nt
City	State	Zip Code		37679.78
Washington	DC	20036-4306	Transac Date o	ction ID: VN7GBA76N49 of Disbursement or Obligation
Purpose of Expenditure Online Advertising - Estimate		Category/	M	M / D D / Y Y Y Y
Offilline Advertising - Estimate		Туре		التنتيا ليا لي
Name of Federal Candidate		Support	Office Sought	t: House District:
Heck, Joe, , ,		<b>X</b> Oppose	Preside	ent Senate State: NV
Calendar Year-To-Date			Disbursement	t For: Primary Seneral
Per Election for Office Sought		7201843.36	2016 Ot	ther (specify) -
(a) SUBTOTAL of Itemized Independent Expen	ditures		<b>)</b>	79765.83
(b) SUBTOTAL of Unitemized Independent Exp	enditures		·· <b>}</b>	7
(c) TOTAL Independent Expenditures				
(b) TOTAL mooperation Expendences	·····		" <b>-</b>	4 4
Under penalty of perjury I certify that the indep with, or at the request or suggestion of, any car party committee) any political party committee or	ndidate or authorized			
Lambe, Rebecca, , ,	[Electroi	nically Filed] Date	m m /	03 2016
Signature			<u> </u>	

Schedule E)		PAGE 3 OF 8 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Senate Majority PAC		C C00484642
Check if 24-hour report 48-hour report New report	Amends report filed	on Mam / Dab / Yayayay
Full Name of Payee Blueprint Interactive		Date of Public Distribution/Dissemination
Mailing Address 1155 Connecticut Ave NW		11 02 2016 Amount
Ste 601		
	ip Code 0036-4306	2429.10  Transaction ID: VN7GBA76N57  Date of Disbursement or Obligation
Purpose of Expenditure Online Advertising - Estimate	Category/ Type	M M / D D / Y Y Y Y
Name of Federal Candidate	<b>✗</b> Support Office	e Sought: House District:
Masto, Catherine, Cortez, ,	Oppose	President Senate State: NV
Calendar Year-To-Date Per Election for Office Sought 72	Disbu 201843.36 2016	Other (specify) ▶
Full Name of Payee	'	Date of Public Distribution/Dissemination
Dixon/Davis Media Group LLC		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1028 33rd St NW		Amount
Ste 300		
	ip Code 20007-3571	17890.00 Transaction ID: VN7GBA76JD4
Purpose of Expenditure Media Production Costs - Estimate	Category/ Type	Date of Disbursement or Obligation
Name of Federal Candidate	Support Office	e Sought: House District:
Heck, Joe, , ,	<b>X</b> Oppose	President Senate State: NV
Calendar Year-To-Date Per Election for Office Sought	Disb 201843.36	ursement For:
(a) SUBTOTAL of Itemized Independent Expenditures	······	20319.10
(b) SUBTOTAL of Unitemized Independent Expenditures	·····	1 7 1 7 1 7
(c) TOTAL Independent Expenditures	······	
Under penalty of perjury I certify that the independent expenditures re with, or at the request or suggestion of, any candidate or authorized coparty committee) any political party committee or its agent.		
Lambe, Rebecca, , , [Electronical Signature	77 7717 77	1 03 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

Schedule E)	NDENT EXPEND	TOTILS		PAGE 4 OF 8 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC	IDENTIFICATION NUMBER ▼
Senate Majority PAC			С	C00484642
Check if 24-hour report 48-hour rep	port New repo	ort Amends repo	rt filed on	/ D = D / Y = Y = Y = Y
Full Name of Payee			Date of Pu	blic Distribution/Dissemination
Precision Network, LLC			11	02 / 2016
Mailing Address 1140 Connecticut Ave NW Ste 800			Amount	
City	State	Zin Codo		141020.60
Washington	DC	Zip Code 20036-4010		141928.60 on ID : VN7GBA76N65
Purpose of Expenditure Online Advertising - Estimate		Category/ Type	Date of Dis	sbursement or Obligation
Name of Federal Candidate			0.00	
Kander, Jason, , ,		Support Oppose	Office Sought:  President	House District:
Calendar Year-To-Date			Disbursement For	
Per Election for Office Sought		609489.28	2016 Other	(specify) ▶
Full Name of Payee Ralston Lapp Media			Date of Pu	ublic Distribution/Dissemination
			11	02 / 2016
Mailing Address 1054 31st St NW			Amount	
Ste 430				
City Washington	State DC	Zip Code 20007-6042	Transaction	20806.09 n ID : VN7GBA76JE2
Purpose of Expenditure		I	Date of Di	sbursement or Obligation
Media Production Costs - Estimate		Category/ Type	M M	/ D D / Y Y Y Y Y
Name of Federal Candidate		Support	Office Sought:	House District:
Johnson, Ronald, , ,		<b>x</b> Oppose	President	Senate State: WI
Calendar Year-To-Date Per Election for Office Sought		3331262.42	Disbursement For 2016 Other	r: Primary   ✓ General  (specify)   ✓
•				
(a) SUBTOTAL of Itemized Independent Ex	penditures		· •	162734.69
(b) SUBTOTAL of Unitemized Independent	Expenditures		· •	
(c) TOTAL Independent Expenditures			<b>&gt;</b>	7
Under penalty of perjury I certify that the ir with, or at the request or suggestion of, any party committee) any political party committee	candidate or authorized			
Lambe, Rebecca, , ,	[Electron	ically Filed] Date	11 0	
- griataro				

Schedule E)	PAGE 5 OF 8 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Senate Majority PAC	C C00484642
Check if <b>X</b> 24-hour report 48-hour report New report Amends report filed of	on M = M / D = D / Y = Y = Y
Full Name of Payee SKDKnickerbocker	Date of Public Distribution/Dissemination
Mailing Address 1150 18th St NW	11 02 7 2016
Ste 800	Amount
City State Zip Code	14951.42
Washington DC 20036-3845	Transaction ID : VN7GBA76JN7 Date of Disbursement or Obligation
Purpose of Expenditure Media Production Costs - Estimate  Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate Support Office	Sought: House District:
Ayotte, Kelly, , ,	President Senate State: NH
Calendar Year-To-Date Per Election for Office Sought  Disburs 2016	sement For: Primary ★ General  Other (specify) ▶
Full Name of Payee SKDKnickerbocker	Date of Public Distribution/Dissemination
Molling Address	11 02 7 2016
1100 Tour Ce 1444	Amount
Ste 800 City State Zip Code	3402.70
Washington DC 20036-3845	Transaction ID : VN7GBA76JP5 Date of Disbursement or Obligation
Purpose of Expenditure Media Production Costs - Estimate  Category/ Type	M M / D D / Y Y Y Y
Name of Federal Candidate Support Office	Sought: House District:
Ayotte, Kelly, , ,	President Senate State: NH
Calendar Year-To-Date Per Election for Office Sought  Disbur 2016	rsement For: Primary   General  Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	18354.12
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	7 7 7
Under penalty of perjury I certify that the independent expenditures reported herein were not mad with, or at the request or suggestion of, any candidate or authorized committee or agent of either, party committee) any political party committee or its agent.	
Lambe, Rebecca, , ,  [Electronically Filed] Date 11	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	

Schedule E)	JENT EXILIND	TIONES		PAGE 6 OF 8 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC ID	ENTIFICATION NUMBER ▼
Senate Majority PAC			C	C00484642
Check if 24-hour report 48-hour report	New rep	port Amends repo	rt filed on	D = D / Y = Y = Y
Full Name of Payee SKDKnickerbocker			Date of Public	Distribution/Dissemination
			11 /	02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1150 18th St NW			Amount	
Ste 800	Otata	75. 0. 4.		0.400.70
City Washington	State DC	Zip Code 20036-3845	Transaction II	3402.70 D : VN7GBA76JQ3
		20030-3043		rsement or Obligation
Purpose of Expenditure Media Production Costs - Estimate		Category/ Type	M - M /	D D / Y Y Y Y
Name of Federal Candidate		Support	Office Sought:	House District:
Trump, Donald, J., ,		<b>x</b> Oppose	<b>x</b> President	Senate State:
Calendar Year-To-Date Per Election for Office Sought		1948052.80	Disbursement For: 2016 Other (spe	Primary <b>✗</b> General ecify) ▶
Full Name of Payee			Date of Public	: Distribution/Dissemination
The Strategy Group, Inc.			M M /	02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 730 N Franklin St			Amount	
Ste 404			Amount	
City	State	Zip Code		40264.63
Chicago	IL	60654-7205		: VN7GBA76JR1 rsement or Obligation
Purpose of Expenditure Direct Mail - Estimate		Category/ Type	M = M /	D D / Y Y Y Y
Name of Federal Candidate		Support	Office Sought:	House District:
Ayotte, Kelly, , ,		<b>x</b> Oppose	President	Senate State: NH
Calendar Year-To-Date Per Election for Office Sought	7	8084743.79	Disbursement For: 2016 Other (sp	Primary <b>✗</b> General ecify) ▶
•				
(a) SUBTOTAL of Itemized Independent Exper	nditures		<b>&gt;</b>	43667.33
(b) SUBTOTAL of Unitemized Independent Ex	penditures		• •	
(c) TOTAL Independent Expenditures			· •	1 7 1 7 1
Under penalty of perjury I certify that the inde with, or at the request or suggestion of, any caparty committee) any political party committee	andidate or authorize			
Lambe, Rebecca, , ,	[Electron	nically Filed] Date	11 03	2016
Signature				

#### 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

OF FOR SE OF FORM 24/48 NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ Senate Majority PAC C00484642 Check if | X | 24-hour report X New report Amends report filed on 48-hour report Full Name of Payee Date of Public Distribution/Dissemination Waterfront Strategies 2016 02 11 Mailing Address 3050 K St NW Amount Ste 100 State Zip Code City 1440080.00 Transaction ID : VN7GBA76JT7 DC 20007-5108 Washington Date of Disbursement or Obligation Purpose of Expenditure Category/ Media Buy - Estimate Type Name of Federal Candidate Office Sought: Support House District: Johnson, Ronald, , , WI Oppose **X** Senate President State: Disbursement For: Primary **✗** General Calendar Year-To-Date 3331262.42 2016 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination Waterfront Strategies 11 02 2016 Mailing Address 3050 K St NW Amount Ste 100 City State Zip Code 837522.87 DC 20007-5108 Transaction ID: VN7GBA76JV5 Washington Date of Disbursement or Obligation Purpose of Expenditure Category/ Media Buy - Estimate Type Name of Federal Candidate Support Office Sought: House District: Heck, Joe, , , NV X Oppose President Senate State: Primary **✗** General Calendar Year-To-Date Disbursement For: 2016 7201843.36 Per Election for Office Sought Other (specify) (a) SUBTOTAL of Itemized Independent Expenditures..... 2277602.87 (b) SUBTOTAL of Unitemized Independent Expenditures ..... (c) TOTAL Independent Expenditures..... Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Lambe, Rebecca, , , [Electronically Filed] 03 2016 Date Signature

**PAGE** 

Schedule E)	PAGE 8 OF 8 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Senate Majority PAC	C C00484642
Check if X 24-hour report 48-hour report New report Amends report filed on	M = M / D = D / Y = Y = Y
Full Name of Payee	ate of Public Distribution/Dissemination
Waterfront Strategies	11 02 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 3050 K St NW Ste 100	mount
	6520.60
Washington DC 20007-5108 Tr	6529.69  ransaction ID: VN7GBA76JX0  ate of Disbursement or Obligation
Purpose of Expenditure Media Production Costs - Estimate  Category/ Type	M M / D D / Y Y Y Y Y
Name of Federal Candidate    X   Support   Office Science   Scienc	ought: House District:
Kander Jason	esident  Senate State: MO
Calendar Year-To-Date Per Election for Office Sought  Disburses 2016	ment For:
Full Name of Payee	ate of Public Distribution/Dissemination
Mailing Address	M   M   / D   D / Y   Y   Y   Y   Y
A	mount
City State Zip Code	
	ate of Disbursement or Obligation
Purpose of Expenditure  Category/ Type	M M / D D / Y Y Y Y
Name of Federal Candidate Support Office So	ought: House District:
Oppose Pre	esident Senate State:
Calendar Year-To-Date Per Election for Office Sought  Disburse	ement For: Primary General  Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	6529.69
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	2771221.78
Under penalty of perjury I certify that the independent expenditures reported herein were not made with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or party committee) any political party committee or its agent.	
Lambe, Rebecca, , ,  [Electronically Filed] Date 11	03 / 2016
Oignatule	